

Los Angeles County Department of Public Health Community Health Improvement Plan Regional Meeting

Service Planning Area 8

October 7, 2014

Meeting Notes

I. Welcome & Introductions

Lydia Ajao, Public Health Nursing Supervisor for Service Planning Area 8 provided welcome, led stakeholder introductions and discussed the meeting purpose. Silvia Prieto, MD, MPH, Area Health Officer for Service Planning Area 7 & 8 was unable to attend and facilitate the meeting. Appreciation and a 'thank you' was provided to Claire Cognard, Cammie Strong and Torrance Memorial Medical Center for providing a meeting space and to Janae Oliver from Kaiser Permanente South Bay for the breakfast.

The intent of this meeting is to launch of network of local stakeholders collaborating to share resources, examine best practices and improve coordination. DPH would like to convene this network on an ongoing basis so that we can all work together on long-term planning and coordination of efforts in our region.

II. Community Health Assessment, Community Health Improvement Plan and Public Health Accreditation

Virginia Huang Richman, Interim Director, Office of Planning Evaluation and Development for the LAC DPH presented the Community Health Assessment (CHA), the Community Health Improvement Plan (CHIP) and Public Health Accreditation.

- Last November the DPH kicked-off a county-wide community health improvement planning process. This process started with public input on DPH's health planning process, as well as input on what to include in an upcoming Community Health Assessment (CHA), a report on the health status and conditions affecting the health of residents in Los Angeles County. The CHA will be posted on our website for public comment.
- Now we are working on developing the CHIP, which is a 5-year county-wide strategic plan for improving the health of Los Angeles County residents. Through this process we will identify areas of need and develop a strategic plan with measureable goals attached to population measures.
- Local health departments can now become accredited when they meet a set of standards which are designed to ensure the quality and performance of our work. The Los Angeles County Department of Public Health is going through this process. This is a process that will be taking place every 5 years, for public health accreditation. The accreditation of local public health departments is happening throughout the country. Although the CHA and CHIP are prerequisites, we see them as opportunities to work more closely with local stakeholders and truly move the needle toward improved health in Los Angeles County.

III. What Is a Healthy Community?

As we think about health, it is important to ensure that we all work from the same place, so there was a discussion of the meeting attendees' vision for a Healthy Community. A video clip from 'Unnatural Causes,' a documentary that examines the role of social determinants in creating healthy communities, was viewed. There was discussion on the Healthy Community definition from the California Department of Public Health's Healthy Communities Data and Indicators Project.

Suggestions for additional features of a healthy community were charted:

- Healthy food availability
- Supporting immigrant communities
- Culturally competent outreach
- Look at assets of communities
- Environmental issues/justice
- Lifestyles
- Health and social equity/connectedness
- Health is holistic
- Health education, especially early childhood
- Housing – coordinated access for those in recovery, with mental health services and public health
- Integration of services without barriers
- Resiliency and strength of families
- Involve private sector on healthy community

IV. Report on Service Planning Area 8 Community Health Assessment

Data from the forthcoming Community Health Assessment was presented on a number of health indicators describing Service Planning Area 8 and comparing it with Los Angeles Countywide data. We also reviewed the hospital Community Health Needs Assessments (CHNAs) and noted the most frequently cited issues in this SPA.

V. Panel Discussion - Local Highlights in Tobacco Control

There was a discussion on the Spectrum of Prevention. Examples of health strategies in SPA 8 that highlight successful interventions in each of the levels of the Spectrum on tobacco control were presented.

- Holly Maynes is from the Behavioral Health Services National Council on Alcoholism and Drug dependency and is the previous Project Manager and Health Educator for the South Bay Fresh Air Coalition for the Tobacco Control and Prevention Program on Outdoor Smoke Free Areas. She worked on passing the Comprehensive Smoke Free Ordinance for Hermosa Beach and the city wide Smoke Free Ordinance for Manhattan Beach. Holly shared strategies she and her coalition have used on Spectrum Levels 2: Promoting Community Education and Level 4: Fostering Coalitions and Networks.
- Carol Alameda is a community organizer from the Asian American Drug Abuse Program Community Prevention. She is a lead campaign staff implementing the Tobacco Contract (Tobacco Retail Licensing Ordinance). She has been a part of the campaign staff that led to the adoption of the Tobacco Retail License in 5 cities: Cerritos, Gardena, Hawaiian Gardens, El Segundo, and Lawndale and is currently working with the cities of Bellflower and Redondo Beach. Carol shared her work based on Spectrum Level 4: Educating Providers.
- Ricardo Torres is an Associate Project Director of Smoke Free Air for Everyone (S.A.F.E), which is a non-profit organization that has one focus on educating the community on the health effects of second-hand smoking. He is the lead project manager for the Lawndale Smoke Free Living Coalition. Ricardo shared with us his work on Spectrum Level 1: Strengthening individual knowledge and skills and Spectrum Level 6: Influencing policy and legislation.

- Lee Williams is a counselor in Kaiser Permanente South Bay Medical Center's Addiction Medicine Department. He is also the Smoking Prevention Cass Facilitator. Lee presented his work on Spectrum Level 5: Changing organizational practices that Kaiser Permanente South Bay Medical Center has adapted through being a Tobacco-Free Campus.

Our network is an example of #4 – organizing coalitions/networks.

VI. Discussion: Opportunities for Collaboration and Coordination in SPA 8

In order to find out what the stakeholders in the room are working on and begin the discussion about coordination among network participants, results of the Eventbrite survey, done at registration, were presented.

- 1) Obesity/healthy living (29)
- 2) Health services/access to care (11)
- 3) Mental health (10)
- 4) Youth development & well-being (7)
- 5) Chronic disease prevention/management (7)
- 6) Homelessness (4)
- 7) Health disparities/social determinants of health (4)
- 8) Mobility access (3)
- 9) Asthma, substance abuse, tobacco, access to parks (2)
- 10) Tongan language materials development/interpretation (1)
- 11) Fall prevention (1)
- 12) Toxic stress (1)
- 13) HIV- AIDS (1)
- 14) Workforce development for health (1)
- 15) Child abuse prevention (1)
- 16) Maternal and child health (1)
- 17) Parenting support (1)

Stakeholders participated in an exercise to determine who is working on the top issues and at which level in the Spectrum of Prevention.

VII. Discussion: What Should This New Network Do?

Stakeholders participated in a brainstorm about possible collaboration and coordination activities to do the following:

- 1) **Resource sharing** with other stakeholders/agencies would be helpful to you?
- 2) **Coordination** with other stakeholders/agencies would be helpful to you?
- 3) Information about **best practices** would be helpful to you?

Suggestions:

- Timely distribution of data from the County
- Provide services to SPA 8 without attending the same service multiple times.
- Informational base on what each service provider offers – repository and resources that are utilized
- Data on specific subgroups (ethnic)
- Free information exchange with bi-directional conversations, without HIPPA violations

- Track how we are changing linkages, what has been successful?
- 'Warm' referral – best practices
- Listserv of coalitions in room (and of resources provided)
- Google doc of resources by field
- Model medical home approaches
- DCFS model
- System of referral
- Funders at future meetings
- Collective Impact Model
- Networking through coalition by monthly and sub group meetings, social media
- Classes, market tours (to read labels & identify healthy foods)
- List serve of resources/ share events
- Share resources through NACs who share resources/info with other NACs
- Collaboration

VIII. Meeting Wrap-Up and Next Steps

The purpose of forming this network of local stakeholders is to collaborate to share resources, examine best practices and improve coordination. DPH would like to convene this network on an ongoing basis so that we can all work together on long-term planning and coordination of efforts in our region.

An advisory group will be convened to help plan future meetings.